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FEC FORM 2 STATEMENT OF CANDIDACY

SECRETARY OF THE SENATE

12 OCT 10 PH 4: 09

(a) Name of Candidate (in full)					
Kirsten Elizabeth Gillibrand					
(b) Address (number and street) 52 East Road	☐ Check if address changed		Candidate's FEC Identification Number S0NY00410		
(c) City, State, and ZIP Code			3 le Thie Mau		
Brunswick	NY	12180	Statement (N) OR X (A)		
4. Party Affiliation	5. Office Sought	6. State & D	istrict of Candidate		
DEMOCRATIC PARTY	Senate	NY	00		
	ESIGNATION OF PRIN				
thereby designate the following n			(year of election)		
NOTE: This designation should be	filed with the appropriate office	listed in the instructions	i.		
(a) Name of Committee (in full)					
Gillibrand for Sena	te				
(b) Address (number and street) 236 Massachusetts Ave. NE					
Suite 110					
(c) City, State, and ZIP Code			-		
Washington		DC	20002		
D 8. I hereby authorize the following na		ER AUTHORIZEI	COMMITTEES		
D	(Including Joint F Imed committee, which is NOT n	ER AUTHORIZEI undraising Representa ny principal campaign c	O COMMITTEES tives)		
B. I hereby authorize the following na candidacy. NOTE: This designation should be	(Including Joint F Imed committee, which is NOT n	ER AUTHORIZEI undraising Representa ny principal campaign c	O COMMITTEES tives)		
B. I hereby authorize the following na candidacy.	(Including Joint F Imed committee, which is NOT n If filed with the principal campaign	ER AUTHORIZEI undraising Representa ny principal campaign c	O COMMITTEES tives)		
B. I hereby authorize the following na candidacy. NOTE: This designation should be (a) Name of Committee (in full)	(Including Joint F Imed committee, which is NOT n If filed with the principal campaign	ER AUTHORIZEI undraising Representa ny principal campaign c	O COMMITTEES tives)		
B. I hereby authorize the following na candidacy. NOTE: This designation should be (a) Name of Committee (in full) Moderate Senate 2 (b) Address (number and street)	(Including Joint F Imed committee, which is NOT n If filed with the principal campaign	ER AUTHORIZEI undraising Representa ny principal campaign c	O COMMITTEES tives)		
D. 3. I hereby authorize the following na candidacy. NOTE: This designation should be (a) Name of Committee (in full) Moderate Senate 2 (b) Address (number and street) 709A 8th Street, SE	(Including Joint F Imed committee, which is NOT n If filed with the principal campaign	ER AUTHORIZEI undraising Representa ny principal campaign c	O COMMITTEES tives)		
D. I hereby authorize the following national candidacy. NOTE: This designation should be (a) Name of Committee (in full) Moderate Senate 2 (b) Address (number and street) 709A 8th Street, SE (c) City, State, and ZIP Code Washington	(Including Joint F Inned committee, which is NOT n If filed with the principal campaign	ER AUTHORIZE(undraising Representa ny principal campaign c committee.	O COMMITTEES tives) ommittee, to receive and expend funds on behalf of my		
B. I hereby authorize the following na candidacy. NOTE: This designation should be (a) Name of Committee (in full) Moderate Senate 2 (b) Address (number and street) 709A 8th Street, SE (c) City, State, and ZIP Code Washington I certify that I have ex	(Including Joint F Inned committee, which is NOT n If filed with the principal campaign	ER AUTHORIZE(undraising Representa ny principal campaign c committee.	COMMITTEES tives) ommittee, to receive and expend funds on behalf of my		
8. I hereby authorize the following na candidacy. NOTE: This designation should be (a) Name of Committee (in full) Moderate Senate 2 (b) Address (number and street) 709A 8th Street, SE (c) City, State, and ZIP Code Washington I certify that I have ex	(Including Joint Filmed committee, which is NOT not filled with the principal campaign 2012	ER AUTHORIZE(undraising Representation) pyrincipal campaign of committee. DC p best of my knowledge	COMMITTEES tives) committee, to receive and expend funds on behalf of my 20003 and belief it is true, correct and complete. Date		
B. I hereby authorize the following na candidacy. NOTE: This designation should be (a) Name of Committee (in full) Moderate Senate 2 (b) Address (number and street) 709A 8th Street, SE (c) City, State, and ZIP Code Washington I certify that I have ex	(Including Joint Filmed committee, which is NOT not filled with the principal campaign 2012	ER AUTHORIZE(undraising Representation) pyrincipal campaign of committee. DC p best of my knowledge	20003 and belief it is true, correct and complete. Date Och. 2, 2012		
B. I hereby authorize the following na candidacy. NOTE: This designation should be (a) Name of Committee (in full) Moderate Senate 2 (b) Address (number and street) 709A 8th Street, SE (c) City, State, and ZIP Code Washington I certify that I have ex	(Including Joint Filmed committee, which is NOT not filled with the principal campaign 2012	ER AUTHORIZE(undraising Representation) pyrincipal campaign of committee. DC p best of my knowledge	20003 and belief it is true, correct and complete. Date Och. 2, 2012		

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)				Page 2 / 4
DESIGNA	TION OF OTHER AUT (Including Joint Fundrals			[ADDITIONAL]
I hereby authorize the following named committee, w candidacy.	which is NOT my principal campa	ign committee, to r	eceive and expend funds	on behalf of my
NOTE: This designation should be filed with	the principal campaign com	mittee.		
(a) Name of Committee (in full)				
Grassroots Victory Fund				
(b) Address (number and street) 15 W. 26th Street Suite 4R				
(c) City, State and ZIP Code				
New York		NY	10010	
DESIGNA	ATION OF OTHER AUT	·		[ADDITIONAL]
I hereby authorize the following named committee, v candidacy. NOTE:This designation should be filled with			eceive and expend funds	on behalf of my
(a) Name of Committee (in full)				
New York Senate 2012				
(b) Address (number and street) 120 Maryland Ave NE				
(c) City, State and ZIP Code				
Washington		DC	20002	
DESIGNA	TION OF OTHER AUT			[ADDITIONAL]
I hereby authorize the following named committee, v candidacy.	which is NOT my principal campa	ign committee, to r	eceive and expend funds	on behalf of my
NOTE:This designation should be filed with	h the principal campaign com	mittee.		
(a) Name of Committee (in full)				
Women on the Road to th	e Senate: 12 and 0	Counting - E	Bay Area	
(b) Address (number and street) 120 Maryland Ave NE				
(c) City, State and ZIP Code			•	
Washington		DC	20002	
				

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FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

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DESIG	GNATION OF OTHER AU (Including Joint Fundre			[ADDITIONAL]
I hereby authorize the following named commi candidacy.	ittee, which is NOT my principal cam	paign committee, to	receive and expend funds (on behalf of my
NOTE:This designation should be file	d with the principal campaign co	mmittee.		
(a) Name of Committee (in full)	· · · · · · · · · · · · · · · · · · ·			
Women on the Road t	to the Senate: 12 and	Counting - I	os Angeles	
(b) Address (number and street) 120 Maryland Ave NE				-
(c) City, State and ZIP Code		·	_	
Washington		DC	20002	
DESI	GNATION OF OTHER AL (Including Joint Fundra			[ADDITIONAL]
I hereby authorize the following named commit candidacy.	ittee, which is NOT my principal cam	paign committee, to	receive and expend funds	on behalf of my
NOTE:This designation should be file	ed with the principal campaign co	mmittee.		
(a) Name of Committee (in full)				· -
Women on the Road to	o the Senate: 12 and	Counting - E	Boston	
(b) Address (number and street) 120 Maryland Ave NE				
(c) City, State and ZIP Code				
Washington		DC	20002	
DESIG	GNATION OF OTHER AU			[ADDITIONAL]
I hereby authorize the following named commit candidacy.	ttee, which is NOT my principal cam	paign committee, to r	eceive and expend funds (on behalf of my
NOTE:This designation should be file	d with the principal campaign co	mmittee.		
(a) Name of Committee (in full)		•••	 	
Women on the Road to	o the Senate: 12 and	Counting - V	Vashington DC	
(b) Address (number and street) 120 Maryland Ave NE				
(c) City, State and ZIP Code			 -	
Washington		DC	20002	
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FEC Form 2 (Rev. 02/2003)				Page 4 /
DESIG	GNATION OF OTHER A	AUTHORIZED Control of the desired Authorized Control of the desired		[ADDITIONAL]
I hereby authorize the following named commit candidacy.	ttee, which is NOT my principal c	ampaign committee, to i	eceive and expend funds	on behalf of my
NOTE:This designation should be file	d with the principal campaign	committee.		
(a) Name of Committee (in full) Women on the Road t	o the Senate: 12 an	d Counting - N	New York City	M. A
(b) Address (number and street) 120 Maryland Ave NE				
(c) City, State and ZIP Code				<u> </u>
Washington		DC	20002	
DESI	GNATION OF OTHER (AUTHORIZED C		[ADDITIONAL]
I hereby authorize the following named commi candidacy.	ttee, which is NOT my principal c	ampaign committee, to	receive and expend funds	on behalf of my
NOTE:This designation should be file	d with the principal campaign	committee.		
(a) Name of Committee (in full)				
Berkley, Gillibrand & F	einstein Victory Fur	nd		
(b) Address (number and street) 709A 8th Street SE			·	
(c) City, State and ZIP Code	<u> </u>			
Washington		DC	20003	
DESIG	GNATION OF OTHER A	AUTHORIZED Co		[ADDITIONAL]
I hereby authorize the following named commit candidacy.	ttee, which is NOT my principal c	ampaign committee, to r	eceive and expend funds	on behalf of my
NOTE:This designation should be file	d with the principal campaign	committee.		
(a) Name of Committee (in full)				
(b) Address (number and street)				
(c) City, State and ZIP Code				
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